

Person and Family Engagement: Q and A:

*This document reflects discussions during the NRHI SAN Patient and Family Engagement Events. We will continue to update this document as we progress through this webinar series.

PFE: How to Help Clinicians Take Action with their Patient Experience Results June 22, 2017

Panelists include:

Jan Singer, MPH, Vice President of Programs, Massachusetts Health Quality Partners
Amy Stern, Ph.D., Senior Project Manager, Massachusetts Health Quality Partners
Lester Hartman, M.D., Westwood/Mansfield Pediatrics
Suzanne Countie, Patient Experience Program Manager, Lowell General Physician Hospital Organization

Are any vendors able to administer the CAHPS survey in languages other than English or Spanish?

Yes, there are vendors that administer the CAHPS in other languages. In some cases you would need to pay for the translation of the survey if it did not already exist. MHQP has administered the CAHPS in Chinese, Portuguese, Russian, and Spanish.

How do you get started selecting a Patient Engagement focus?

Dr. Hartman shared that his practices first look at things that are patient focused, such as child development and self-management, then they look at staff organizational concerns where the director determines the priority. Dr. Hartman shared that despite high scores on knowledge of patient, their practice felt this was an area where they could still improve, so made this a focus. To address this, they developed a yellow stickie in the EHR and included characteristics of each child; parents then completed a survey on the strengths of their child and that information was added to the yellow stickies. Through this initiative they were able to increase the practices' scores in knowledge of patients.

Look for small successes and create action plans around those improvement areas. Look at ways that scores can be improved, for example, through customer service training, scripting training, utilizing and maximizing the EHR, etc. Find out information and make it part of the dialogue in all areas of the appointment.

Have you had experience with clinicians who were skeptical of the results?

Suzanne's role was specifically working with clinicians to get their buy-in to focus on patient experience. One common strategy to work with clinicians who may be skeptical of the results is to have organizations complete their own mini surveys and compare these results to the MHQP survey results. Another strategy is to work with providers on moving forward to implement some small changes and then grow the Patient Experience focus from there. Implementing Patient Experience Provider Advisory Councils is a good way for physicians to share their strategies and advice.

How do you decide when you're done a Quality Improvement initiative?

One thing to think about when working on continuous Patient Experience QI initiatives is survey fatigue. Patient Experience projects can be on-going, but it's not necessary to be running full scale surveys to test every change. Encourage random sampling with patients using a mini-survey once a month when working on a specific change.

Providers like to be competitive, so showing them the results of surveys in comparison to their peers and changes over time is helpful. When improvements are seen, it is important for providers to talk with their patients to better understand what changes are making a difference. The physician champion should be of the philosophy of continuous quality improvement.

Not all patients have access to patient portals, how do you make sure all populations are given the interaction and attention needed?

It's important to have clear, consistent scripted messages and to spread these messages in various formats. Have messaging throughout the office in the form of check out cards, scripting cards, and placards in the back of exam rooms so a provider can review a checklist and make sure everything has been covered. Messaging needs to be a blend of both paper and electronic with consistent language for people who want each form of communication. Consider sharing mailings and / or videos on topics of interest / concern during certain time of years, for example, Lyme Disease.

How have you brought the patient parent voice collaboratively into the work you are doing?

Conduct community outreach by hosting forums on various topics of interest to the community, for example parent forums on concussions, autism, etc. and invite parents to come out and share suggestions on how to improve care. Parent Advisory Groups only need to meet about once per quarter and can be a good opportunity for providers to meet with parents and provide updates on initiatives and gather input.